



MISCELLANEOUS RESIDENTIAL BUILDING APPLICATION

PROPERTY INFORMATION	
Project Address:	
Owner Name:	Phone #:
Owner Address:	

CONTRACTOR INFORMATION
Contractor Name:
Contractor Address:

TYPE OF PERMIT			
<input type="checkbox"/> Roof Replacement	<input type="checkbox"/> Patio/Driveway/Walkway/Deck	<input type="checkbox"/> Patio Cover/Arbor/Pergola	
<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Swimming Pool/Hot Tub	<input type="checkbox"/> Residential Remodel	<input type="checkbox"/> Foundation Repair
Describe Work:			
Total Sq Ft:	Deck/Patio Sq ft:	Patio Cover Sq ft:	Fire Damage: <input type="checkbox"/> Yes <input type="checkbox"/> No
Cost of Improvement:			Fence Height:

PROPERTY OWNER/AGENT AUTHORIZATION			
<p>Homeowners Association: If the property is located in a subdivision with an active Homeowners Association (HOA), please indicate whether approval has been obtained for any of the work being completed as a part of this application. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>			
<p>Property Owner Consent/Agent Authorization: By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's fee schedule. This fee is non-refundable even in the event of application withdrawal. I have the power to authorize and hereby grant permission for City of Dickinson officials to enter the property on official business as part of the application process</p>			
<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 50%;">_____ Signature of Contractor/Authorized Agent</td> <td style="border: none; width: 30%;">_____ Printed Name</td> <td style="border: none; width: 20%;">_____ Date</td> </tr> </table>	_____ Signature of Contractor/Authorized Agent	_____ Printed Name	_____ Date
_____ Signature of Contractor/Authorized Agent	_____ Printed Name	_____ Date	

FOR OFFICE USE ONLY			
Permit Number: _____	Fees Due: _____		
Date Submitted: _____	Payment: _____		
Zoning: _____	Plan Reviewer: _____	Date: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied

You can email this application along with supporting documentation to:
permits@ci.dickinson.tx.us